Status Report (Gantt Chart, Narrative Entries, and FAQs) on Deploying CAHAN (the CAlifornia Health Alert Network) Using the BioTerrorism Readiness Suite (BTRS)

as of 2003 August 26

Emergency Preparedness Office (EPO), California Department of Health Services (CDHS)

http://www.dhs.ca.gov/epo

The mentions of URLs and products in this document are for identification only and do not imply endorsement by the California Department of Health Services.

The purpose of this continually-revised document, which is posted at the URL above, is to update local health jurisdictions and others on the status of the deployment of the BioTerrorism Readiness Suite (BTRS) hardware and software for the California Health Alert Network (CAHAN). The Gantt chart below (which shows only major objectives and activities) provides a "bird's-eye view" of project. The most recent narrative entry is found on the next page, with older entries below. In the final section are answers to Frequently Asked Questions (FAQs).

For a summary of major events concerning CAHAN (BTRS) on or prior to 2002 December 4, see http://www.dhs.ca.gov/epo/PDF/CCLHO Presentation 2002-10 Updated.pdf. For information about Virtual Alert, which produces BTRS, go to http://www.virtualalert.com/. For a brief description of CAHAN (BTRS), see http://www.dhs.ca.gov/epo/EPOCAHAN.html. For any questions about CAHAN (BTRS) not answered by this document or the URLs above, please feel free to contact Dr. Richard Sun at (916) 322-2208 or rsun@dhs.ca.gov.

Gantt Chart

Narrative Entries in Reverse Chronological Order

Events Planned for the Near Future:
- September 10: Next Focus Area E Workgroup* teleconference (unless one is needed August 27).

Events That Have Already Occurred

2003 August 20: Medium-priority alert sent to all CAHAN users about West Nile Virus being found in mosquito pools in Imperial County.

2003 August 15: First use of a CAHAN to notify only CDHS Executive Staff about a situation, in this case a computer virus/worm problem (see FAQ #108).

2003 August 14: CCLHO Data Committee meeting; Dr. Sun summarizes progress and answers questions. In addition, low-priority alert sent to selected CAHAN users about a human case of West Nile Virus imported to Alameda County.

2003 August 13: Focus Area E Workgroup teleconference. A human error caused an incorrect passcode for the telephone bridge to be transmitted. Among other topics, CalPHIN and the exercising of communications systems were discussed.

2003 August 12: Virtual Alert takes steps to prevent CAHAN being attacked by the "Blaster" worm/virus prevalent on the Internet.

2003 August 8: CalPHIN steering committee meeting. CAHAN's directory, authentication, and security infrastructure may be used to provide a single gateway/portal to various CalPHIN projects.

2003 August 8: New CAHAN message center phone number (916-498-8720) established for suggestions, comments, issues, problems.

2003 July 30: U.S. General Accounting Office report "Severe Acute Respiratory Syndrome: Established Infectious Disease Control Measures Helped Contain Spread, But a Large-Scale Resurgence May Pose Challenges" (GAO-03-1058T, see http://www.gao.gov/new.items/d031058t.pdf) mentions CAHAN on page 15 under "Success in Implementing Infectious Disease Control Measures Depended on Rapid and Frequent Communication."

2003 July 29: The final pilot session of the upcoming needs assessment (see FAQ #004) is held in Placer County. (Previous pilots were performed in Butte and Sacramento.)

2003 July 24: Focus Area E all-jurisdiction teleconference. Among other topics, CAHAN portals vs. folders, other CAHAN administrative and user issues, and the future of CAHAN are discussed.

2003 July 18: Focus Area E Workgroup teleconference. Among other topics, the interaction of Focus Areas "A" and "E" in notification & response, the Virtual Alert presentation on July 10, and Cal-PHIN are discussed.

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* CDC bioterrorism grant Focus Area E is "Health Alert Network/Communications and Information Technology." See CDC's 2002 guidance at http://www.bt.cdc.gov/planning/CoopAgreementAward/CDC6BTATTACHMENT-E-MASTER-2-14-2002-639pm.asp and 2003 guidance at http://www.bt.cdc.gov/planning/continuationguidance/pdf/healthalertnetwork_attache.pdf. The Focus Area E Workgroup consists of a small number of local and state staff (see FAQ #006).

2003 July 17: CDHS requests a transfer in unexpended State Assistance funding to Direct Assistance. Part of the request is to be used for Focus Area E: local assessments (see FAQ #004), redundant CAHAN site, security, and a clinician registry.

2003 July 10: Virtual Alert representatives give "public health roadmap presentation" for CDHS CalPHIN and Focus Area E staff, summarizing plans for the future development of CAHAN and related products.

2003 July 1: Application to CDC for 2003-4 funds is transmitted to Atlanta which includes proposals for CAHAN and other Focus Area E efforts. Unfortunately, the lack of a State budget hinders the planned assessment (see FAQ #004).

2003 June 27: Focus Area E Workgroup teleconference. Among other topics, there was discussion of transition plans after Bob Hall's last day with Focus Area E (June 30).

2003 June 12: At CCLHO Data Committee meeting, Dr. Sun summarizes progress to date and answers questions, especially about CAHAN's relation to CalPHIN (see FAQ #203).

2003 June 9: Focus Area E Workgroup teleconference. Among other topics, the CDC guidance due July 1 and the CHAIN evaluation (see FAQ #207) were discussed.

2003 June 3 & 6: Two administrator trainings completed as part of "Wave 4 and beyond" efforts.

2003 June 5: At CCLHO meeting, Dr. Sun summarizes progress to date and answers questions.

2003 June 2: Over 800 registrants now on CAHAN.

2003 May 20, 22, and 30: Alerts sent to "All CAHAN Users" on the increase in national threat level from yellow to orange and back to yellow again.

2003 May 22: Virtual Alert enhanced CAHAN with AT&T "Natural Voices" technology that converts text into speech that is more intelligible than the electronic voice used since January 2003.

2003 May 22: Focus Area E Workgroup teleconference. Due to a technical difficulty with the telephone bridge, some members could not dial in. Among other topics, the Focus Area E response to the new CDC guidance, the possibility of obtaining licenses for tens of thousands of additional users, and methods for implementing two-factor authentication were discussed.

2003 May 21: EPO Focus Area E staff received demonstration licenses to evaluate CHAIN (see FAQ #207).

2003 May 13-15: National Public Health Information Network (PHIN) conference in Atlanta. CAHAN is demonstrated. Afterwards, EPO Focus Area E staff and other CDHS staff who attended discussed how to disseminate the conference findings to a wider audience in California.

2003 May 8: Focus Area E all-jurisdiction meeting in Sacramento. Among other issues, a tool for assigning roles etc. to new CAHAN users is demonstrated. There were updates on CAHAN deployment and the future of CAHAN.

2003 May 6: The number of CAHAN registrants approaches 700.

2003 April 25 & May 2: Focus Area E staff participate in discussions regarding "Wave 5."

2003 April 29: Final "Wave 3" CAHAN regional training (one was scheduled on April 30 but postponed due to low attendance). See FAQ #012 concerning trainings in "Wave 4" and beyond.

2003 April 24: Internal CDHS meeting on PHIN (see FAQ #203). EPO Focus Area E staff learned about projects such as CalPHIN which will be related to CAHAN.

2003 April 24: Focus Area E Workgroup teleconference. The major issues were arranging the FAE leads meeting in Sacramento on May 8, and protocols for who should be able to alert whom statewide (see FAQ #011).

2003 April 22: As "Wave 4" progresses, the number of CAHAN registrants exceeds 500.

2003 April 16-17: A low-priority alert is sent on the decrease in national threat level. Focus Area E staff detect a delay in receipt of the e-mail alert by many users and work with Virtual Alert to prevent the problem in the future.

2003 April 11: Focus Area E all-jurisdiction teleconference, with presentations on the Community Health Alert Information Network (CHAIN) being deployed by the California Medical Association and Invizeon (see FAQ #207), on redundant systems, and on CAHAN issues.

2003 April 10: Focus Area E Workgroup teleconference. Among other issues, additional statewide roles are discussed. Meanwhile, Virtual Alert upgrades CAHAN security. See FAQ #202.

2003 April 8: Virtual Alert upgrades the BTRS software underlying CAHAN from version 2.1 to 2.2. Meanwhile, Dr. Sun meets with Focus Area E staff in Los Angeles County to discuss HASTEN and CAHAN.

2003 April 4: First CAHAN "Wave 3" regional training is held in Sacramento. Further trainings will occur throughout the State through April 30.

2003 April 3: At CCLHO meeting, Dr. Sun summarizes progress to date and answers questions. In addition, EPO Focus Area E staff speak with counterparts in Los Angeles County and Arizona to coordinate efforts.

2003 March 28 - April 3: Medium-, high-, and low-priority alerts are sent to all users about deferral of the California smallpox vaccination program until April 7 to allow establishment of procedures regarding cardiac symptoms and risk factors. Follow-up e-mails are sent to people whose high-priority Alerting Profile included only a single e-mail address.

2003 March 27: E-mail is sent to CCLHO and CHEAC, and "cc"ed to registered bioterrorism leads, concerning dates and locations for "Wave 3" trainings statewide and plans for allocating more CAHAN seats in "Wave 4." Each jurisdiction can choose how to distribute its allocation among Full, Limited, and Basic licenses. See FAQ #010.

2003 March 27: Project management consultant (JK Corporate Services) restarts on work from December on assessment contract and on overall CAHAN project.

2003 March 26: Focus Area E Workgroup teleconference. There was a presentation on the CHAIN being deployed by the California Medical Association and Invizeon (see FAQ #207). The proposed dates and locations for "Wave 3" trainings statewide were discussed.

2003 March 25: A medium-priority alert was sent to all users about smallpox vaccination deferral for persons with heart disease.

2003 March 17: High-priority alerts were sent to selected users about severe acute respiratory syndrome (SARS) and about the increase in threat level to orange. Documents on SARS are added to the CAHAN Web portal.

2003 March 13: EPO Focus Area E staff demonstrate CAHAN for visitor from CDC.

2003 March 12: EPO Focus Area E staff answer questions by a California Department of Finance representative about the past, present, and future of CAHAN.

2003 March 11: Focus Area E Workgroup teleconference. Among other issues, the Workgroup confirmed that the contract with Envoy should not be renewed after the BTRS backup is functional, and decided that PVMS should not be part of the $1.5M Direct Assistance.

2003 March 3 & 10: Two additional staff -- Assistant and Associate Information Systems Analysts - begin work in Focus Area E in EPO.

2003 March 4-5: EPO Focus Area E staff communicate with CDC and with Virtual Alert concerning possible details of the $1.5M in additional Direct Assistance (see FAQ #003), customization of workspaces, and hardware/software enhancements. Virtual Alert will soon be transitioning from version 2.1 to 2.2 of BTRS (see http://www.virtualalert.com/pdf/BTRS/Evolution.pdf).

2003 February 27: EPO Focus Area E staff meet with CDHS management to discuss management's concerns about CAHAN alerts. Documents already posted to CAHAN and the already-established change request process are reviewed. Several minor change requests are formulated.

2003 February 25: Focus Area E Workgroup teleconference. A representative of Virtual Alert attended to answer questions. Among the requests made were documents describing which Focus Area E requirements CAHAN covers and how LHJs can customize CAHAN for local use. FAQs (e.g., #103 on licensing levels) at end of this document are revised.

2003 February 18-19: "Wave 2" training of trainers in Sacramento. The first day was a "user" training, and the second day was an "administrator" training. Among the requests made were documents giving guidelines on alerting and posting; these were written and placed in the CAHAN Document Library on February 26.

2003 February 13: Medium-priority alert sent to CCLHO and CHEAC members about shipment of smallpox vaccine.

2003 February 13: At meeting of the CCLHO data committee, Dr. Sun summarizes progress to date and answers questions.

2003 February 7-9: In response to the increase in the U.S. terrorism threat level from yellow (elevated) to orange (high), the first "high-priority" non-test alert is sent. Documents are added and other improvements are made to the CAHAN Web portal.

2003 February 6: Fax alerting capability is tested.

2003 February 5: Focus Area E Workgroup teleconference. Among other requests, the Workgroup asked that a table be sent to CCLHO and CHEAC members to summarize the various statewide Focus Area E systems. FAQs at end of this document are revised to address other issues raised.

2003 February 5: All CAHAN users receive a test alert; those who indicated telephone numbers in their "high-priority" Alerting Profiles receive the alert by telephone. Fax alerting capability is added and tested internally.

2003 February 4: Telephone alerting capability is added and tested internally.

2003 February 4: EPO Focus Area E staff receive "BTRS administration" training with Virtual Alert, similar to the second day of "train the trainer" training (see FAQ #005).

2003 January 30 - February 3: EPO Focus Area E staff respond to dozens of phone calls and e-mails in follow-up to the test alert.

2003 January 29: All CAHAN users receive a "medium priority" test alert via e-mail and alphanumeric pager (if those locations were specified as "medium priority"). Minor problems associated with a few incorrect e-mail addresses identified during the CAHAN roll-out are corrected. In addition, a test alert is sent to all interim Rapid Alert System (RAS) users to test redundant capabilities. (rev.2/10)

2003 January 28: EPO Focus Area E staff e-mail more than 370 CDHS staff and local health jurisdiction staff their IDs, passwords, and instructions for logging in to the Web site. Users must enter information on the Web site to complete the registration process.

2003 January 27: A test alert is sent through the interim Rapid Alert System (RAS) to CHEAC members and others.

2003 January 24-26: EPO Focus Area E staff had planned to e-mail users their IDs, passwords, and instructions for logging in to the Web site; unfortunately, an e-mail system failure at CDHS partially attributable to the so-called "Slammer" worm prevented this from happening. (rev. 1/27)

2003 January 22-23: EPO Focus Area E staff meets with Virtual Alert staff to discuss project details. Web portal and e-mail (including alphanumeric pager) alerting capability are established and tested internally. (rev.1/26)

2003 January 21: E-mail is sent to all CCLHO and CHEAC members to determine which people and roles should occupy the first five seats in each LHJ (see FAQ #002). Candidate accepts Senior Information Systems Analyst (Supervisor) position and is scheduled to begin work on January 31.

2003 January 17: Focus Area E Workgroup meets by teleconference. FAQs at end of this document are revised to reflect decisions made.

2003 January 17: All-jurisdiction Focus Area E technical assistance conference call is held. (This is the second one; the first was on 2002 Nov. 21.) FAQs at end of this document are revised to address the questions raised.

2003 January 16: At meeting between Focus Area E staff and Virtual Alert, project is determined to be on track. Software installation and testing is underway.

2003 January 16: At CHEAC meeting, Dr. Sun summarizes progress to date.

2003 January 14: The domain name CAHAN.CA.GOV has been reserved for people who access California' CAHAN (BTRS) system.

2003 January 10: Focus Area E Workgroup discusses the allocation of "seats" for the "Wave 3" users. In addition, Workgroup discusses the potential $1.1M (or more) direct assistance to localities. FAQs at end of this document are revised to address the Workgroup's recommendations.

2003 January 9: At CCLHO meeting, Dr. Sun summarizes progress to date and answers questions.

2003 January 9: At meeting between Focus Area E staff and Virtual Alert, project is determined to be on track. The hardware has already been installed at a secure offsite location; software installation and testing will follow.

2003 January 7: At internal meeting, CDHS management asks Dr. Sun various questions about BTRS. FAQs at end of this document are revised to address the questions.

2003 January 6: EPO Focus Area E staff continue discussions with University of California at Davis (UC-Davis) staff to discuss possible assessments and trainings that will be critical for Waves 2-4. UC-Davis staff also demonstrates open-source software such as whiteboards that could be added to CAHAN (BTRS) to enhance its functionality.

2003 January 2-6: EPO Focus Area E staff interview candidates for the Senior Information Systems Analyst (Supervisor) position, who will serve as lead for CAHAN (BTRS) and other Focus Area E projects under Dr. Sun's supervision.

2002 December 27: EPO Focus Area E staff meets with project management consultant (JK Corporate Services) to refine project schedule. In addition, they speak with CDC about details of the potential $1.1M direct assistance to localities, and review budgets to determine if even more than $1.1M can be allocated to localities in "Wave 4" which is added to the Gantt chart above.

2002 December 23: CDHS interim Rapid Alert System (RAS) is fully "populated." Contact information for users of the RAS will be migrated to CAHAN (BTRS) in early February 2003 and regularly after that. (To learn more about the RAS, see http://www.dhs.ca.gov/epo/EPORAS.html.) The RAS is intended for local health officers (i.e., CCLHO members), county health executives (i.e., CHEAC members), selected local bioterrorism leads, and selected CDHS staff. It will have limited usefulness (i.e., will be a backup alerting system) after BTRS is deployed in January 2003. (rev.1/24)

2002 December 20: EPO Focus Area E staff meet with project management consultant (JK Corporate Services) and agree upon project schedule summarized in the Gantt chart above.

2002 December 16: CDHS Information Technology Services Division and Emergency Preparedness Office establish interim Emergency Response Secure Documents System Web site. The site will store documents about a current crisis requiring a public health agency response such as smallpox vaccination. It is intended only for local health officers (i.e., CCLHO members), county health executives (i.e., CHEAC members), and selected CDHS staff. The Secure Documents System will have limited usefulness after BTRS is deployed in January 2003. (rev.1/14)

2002 December 15: The federal General Services Administration, on behalf of the Centers for Disease Control and Prevention, awards a contract to Northrop Grumman to provide Health Alert Network services to EPO. This contract has been sublet to Virtual Alert.

Week of 2002 December 9-13: CHEAC Executive Committee decides to "support[] the recommendation of CCLHO that the excess $1.1M in state funds … [be] used by the state to negotiate with the Centers for Disease Control (CDC) to procure Virtual Alert's BTRS for local health jurisdictions."

001-099: Project Administration and Budget
101-199: General Features of CAHAN (BTRS) Itself
201-299: Relationship of CAHAN (BTRS) to Other Computer Systems and Standards
(numbering system allows for insertion of future questions; dates of most recent revisions of paragraphs in parentheses)

001-099: PROJECT ADMINISTRATION AND BUDGET

001. What is the cost of CAHAN (BTRS) to local health jurisdictions (LHJs)?

As with the interim health alerting systems, there is no direct charge to LHJs for Waves 1-4 described in the Gantt chart above. As long as Direct Assistance from CDC is available, LHJs will pay nothing for the approximately 19,600 users anticipated to be on CAHAN by mid-2003 (see FAQ #010). (rev.6/2)

LHJs do not need to purchase or install any software or hardware. Any LHJ employee can access CAHAN (BTRS) from anywhere in the world using a Web browser. A high-speed ("broadband," "DSL," "cable modem," or "T1") Internet connection is preferred, but a dial-up connection can also be used. (rev.1/26)

002. Why are there only 400 "seats" in Waves 1-3 of CAHAN (BTRS), and how were these seats allocated?

The decision to request direct assistance from CDC was made during a period in which there was great uncertainty over the future of RHEACTS. See http://www.dhs.ca.gov/epo/PDF/CCLHO Presentation 2002-10 Updated.pdf. The decision was made to allocate $350,000 initially, which through negotiation led to 400 seats. This is equivalent to the number of seats originally proposed in CDHS's application to CDC for the first phase of RHEACTS. (1/7, rev.1/10)

Up to five users in each of the 58 jurisdictions were given access to BTRS during Waves 1-3. The remainder of the seats were allocated to CDHS staff involved with emergency response. (1/7)

The FAE Workgroup recommended on January 10 that of the first five seats per jurisdiction, the first three seats be standardized to the following "roles":
- Public Health Officer (i.e., CCLHO member)
- Public Health Administrator (i.e., primary CHEAC member)
- Disaster Response Coordinator

The remaining (fourth and fifth) seats would be decided upon by the LHJ, but the Workgroup recommended the following two:
- Environmental Health Director
- Laboratory Director (where available).

On January 21, each CCLHO and CHEAC member received an e-mail containing:
- List of the people identified in the LHJ to fill the three standardized roles.
- List of recommended people and roles identified in the LHJ to fill the fourth and fifth seats.
- A list of all predefined roles.
- If any of the seats was unsatisfactory, the procedure to follow to request that other people from the LHJ be included in the BTRS system in any other predefined role. (rev.1/26)

The Focus Area E Workgroup discussed whether people not in local health agencies should be allowed access to CAHAN in Waves 1-3. There was opposition due to the limited number of seats available. In Wave 4, adding such seats would be possible at each jurisdiction's discretion. (2/5)

003. What will the $1.5M funding for Wave 4 be used for: Implementation assistance? Buying additional seats? How much will be available by jurisdiction? What would be the process for requesting assistance?

At the Focus Area E Workgroup conference call on January 10, there was a consensus that the vast majority of these funds should be used for additional CAHAN (BTRS) seats. The minimum number per LHJ would be 12, with additional allocations based upon population. (rev.3/27)

In addition, the Workgroup felt that some monies could be used to assist in implementation and to add distance learning capabilities. The Focus Area E assessment (see FAQ #004) may help in determining the numbers of users, levels of access, and other needs for the long term. (rev. 3/27)

004. What assessment assistance will be provided to LHJs? What is the current status?

See CDC's 2002 guidance at http://www.bt.cdc.gov/planning/CoopAgreementAward/CDC6BTATTACHMENT-E-MASTER-2-14-2002-639pm.asp and 2003 guidance at http://www.bt.cdc.gov/planning/continuationguidance/pdf/healthalertnetwork_attache.pdf. Assessment activities should cover "existing communication connectivity," "redundant communication," "policies and

procedures for protecting and granting access to secure systems," and "secure electronic exchange of clinical, laboratory, environmental, and other public health information in standard formats." (1/7, rev.7/2)

The assessment assistance plan that is being discussed through the University of California at Davis (UC-Davis) is also designed to provide implementation assistance. Both types of assistance will be free of charge to LHJs. The information gathered through this process will identify the gaps and assist local jurisdictions in determining how to remedy gaps between the baseline and the CDC IT guidelines. Additionally, this assessment is designed to establish the role-based communications system that will feed directly into the CAHAN (BTRS) system. (rev. 4/2)

The assessment assistance is now planned based on a mutual aid region-centric approach. There are six mutual aid regions and all jurisdictions would take part in the process. The plan is to accomplish this before September 2003; however, some decisions will need to be made before the assessment is complete. (1/7)

As of August 2003, the interagency agreement with UC-Davis has not been made final. As discussed at Focus Area E Workgroup meetings, in the absence of a State budget, EPO Focus Area E staff will endeavor to at least complete the assessment tool so that it can be shared with LHJs. Meanwhile, direct assistance from CDC has been requested for the assessment process. (rev.8/11)

005. Who should be sent to the trainings in Waves 2 and 3? Where will they be held? What will they cover?

In Wave 2, at least one person in each Mutual Aid region was designated a "trainer" to be able to train others in at least one regional session. (For a map of the Mutual Aid regions, see http://www.oes.ca.gov/oeshomep.nsf/csti/Mutual+Aid+Map/$file/MUTAID.pdf.) The trainers are relatively familiar with computers and able to teach others. The "train the trainer" session for the 20 people in Wave 2 occurred February 18-19 in Sacramento. (rev.3/27)

In Wave 3, CDHS staff (in collaboration with the people trained in Wave 2) gave user and admin trainings in each region. (rev. 6/2)

006. Who are the LHJ members of the Focus Area E Workgroup?

Dr. Benjamin Lehr, Imperial County; Dr. Darryl Sexton, Long Beach City; Ray Aller and David Cardenas, Los Angeles County; Sandy List and Dr. Fred Schwartz, Marin County; Carol Mordhorst, Mendocino County; Malcolm Chou, Orange County; Dr. Gary Feldman, Riverside County; Michael Gilbert and Dr. Glennah Trochet, Sacramento County; Jackie Hopkins, San Diego County; Dennis Reed, San Luis Obispo County; Mel Howard and Marta McKenzie, Shasta County; and Carol Huang, Trinity County. In addition, Judith Reigel with CHEAC and Eileen Eastman with CCLHO attend the teleconferences. (rev.7/2)

007. What does the "R" in "BTRS" stand for: "Response" or "Readiness"?

"Readiness." Previous versions of this document and various e-mails have incorrectly used the term "Bioterrorism Response Suite," which is a product of iWay Software (see http://www.iwaysoftware.com/products/bioresponse.html). (1/22)

008. If I want to buy BTRS seats for my organization, how much would each seat cost?

For the cost of BTRS as a service for the first 400 seats that CDC has acquired through a Direct Assistance process on behalf of California, see the "Estimated & Quoted Costs" slide at http://www.dhs.ca.gov/epo/PDF/CCLHO Presentation 2002-10 Updated.pdf. The current costs are substantially less (see FAQ #103). (rev.2/26)

Per user per year, the cost for the service would probably be less for more users and more for fewer users. That is why Dr. Sun has suggested that LHJs who wish to purchase more BTRS seats "pool" their resources and negotiate as a group with the vendor. Furthermore, over time, per user per year, the cost for *purchasing* the hardware, software, and annual licenses would probably be less than the cost as a *service*; however, the State cannot make such a information technology purchase on behalf of LHJs without going through a Feasibility Study Report process. (1/22)

009. "CAHAN": How do I pronounce it? Why isn't the system called "CHAN"?

We are unable to find any encyclopedia, dictionary, or online database that contains an "official" pronunciation of names such as "O'Cahan" or "Cahan." We therefore suggest /ˈkā-hǎn/, which rhymes with the name of a manufacturer of sunglasses. (An alternative would be /kän/ [with the "a" as in "father"], as given in a list of pronunciations of names of

"lesser known and contemporary public figures" from the Library of Congress. Note that the pronunciations for "Cahan" and "Kahane" are different.) (2/3, rev. 2/4)

We did not want our system to share its name with a current movie star. On the other hand, should Kansas in the future want to name its Health Alert Network system "HAN**KS**," that's up to them! (2/3)

010. How can users sign up for CAHAN in "Wave 4"?

An e-mail was sent to CCLHO and CHEAC, and "cc"ed to registered bioterrorism leads, on March 27. Briefly, approximately 19,600 licenses will be allocated among LHJs. Each jurisdiction will have a minimum of 12 Full licenses, with the vast majority of the remaining funds used for additional licenses for LHJs based upon population. The estimate for the distribution of licenses above the first 12 (50% of funds for Full licenses, 25% for Limited, and 25% for Basic) is arbitrary at this time. (3/27)

The intention is for CAHAN administrators in local jurisdictions to add users beyond the first 12. Each jurisdiction will need to decide what percentage of funds should be used for Full versus Limited versus Basic licenses, hopefully using assessment data (see FAQ #004) to do so. (3/27)

If a jurisdiction does not have a CAHAN administrator, CDHS staff will perform the "populating" for that jurisdiction. Designated additional users need to fill in the form at http://www.dhs.ca.gov/epo/EPOCAHANS ignup.html. (rev. 3/27)

011. What is the current set of available statewide public health roles?

The allowable roles are (alphabetically):
Bioterrorism Coordinator
Border Health Coordinator
Chief Epidemiologist
Communicable Disease Coordinator
Deputy Health Officer
Disaster Response Coordinator
Emergency Response Coordinator
Environmental Health Director
Epidemiologist
Health Alert Network Coordinator
Immunization Director
Laboratory Director
LEMSA (Local Emergency Medical
    Services Agency) Administrator
LEMSA Medical Director
Pharmaceutical Stockpile Coordinator
Public Health Administrator
Public Health Nursing Director
Public Health Officer
Public Health Training Coordinator
Public Health Veterinarian
Public Information Officer
Regional Disaster Medical Health
    Coordinator
(4/14)

Brief definitions of these roles can be found in the "CAHAN Instructions" folder on CAHAN. The Focus Area E Workgroup has the responsibility of adding any more roles to the list. The role names need to be consistent across jurisdictions so that effective alerting can occur. (rev.4/22)

CAHAN administrators in local jurisdictions may give whatever names they wish to public health roles within their jurisdictions (e.g., "Alpine County Fire Chief"). However, the list above contains all roles that can be notified on a statewide basis. Anyone who should be notified directly from the State should be assigned one of the roles above. (4/14)

012. What types of training are available in "Wave 4" and beyond?

EPO is committed to more Administrator (i.e., "train-the-trainer") trainings around the state in perpetuity. Schedules are posted on the EPO Web site and on CAHAN. We do not anticipate any problem if people from one region want to attend an admin training in another region. (rev.6/2)

Unfortunately, EPO does not have enough staff to perform in-person user trainings for all of the approximately 19,600 people who could be registered on CAHAN. In-person user trainings will be the responsibility of CAHAN administrators in local jurisdictions. EPO will provide materials and guidelines that local CAHAN administrators can use for in-person user trainings. EPO has posted (on its Web site and on CAHAN) lists of local CAHAN administrators that LHJ staff can contact to find out about upcoming user trainings. (rev.6/2)

For people who cannot attend in-person user trainings, self-training materials will soon be available on the CAHAN secure Web portal. (4/14)

101-199: GENERAL FEATURES OF CAHAN (BTRS) ITSELF

101. What distance learning capabilities will CAHAN (BTRS) provide?

Currently the CAHAN (BTRS) system can provide the simplest of distance learning capabilities such as PowerPoint presentations and other documents. In California, Focus Area C (Laboratory Capacity - Biologic Agents) has developed a set of distance learning modules that will be available through the portal. This effort is being supported by

California State University - Sacramento. Other capabilities for video streaming and videoconferencing are being pursued through an agreement with the University of California at Davis. Satellite broadcasting capabilities will be one of the areas examined in the assessment of the State and local jurisdictions (see 2003 January 6 entry). (1/7, minor rev. 1/17)

102. What is "delegated administration"?

See the Virtual Alert document http://www.virtualalert.com/pdf/BTRS/Features_Benefits_New.pdf. This is also known as "distributed administration." It is the granting of "administration rights… to local officials, so as to ease the burden on the central administrator(s). These local administrators can then manage the users within (but only within) their jurisdiction." (1/7)

If delegated administration is improperly performed, a person can damage directories and other information vital to CAHAN (BTRS). For this reason, the only "delegated administrators" will be people who have attended an appropriate training. (1/17)

103. What are the different levels of licensing for users?

The Virtual Alert document http://www.virtualalert.com/pdf/BTRS/Levels%20of%20Licensing%202_3_4.pdf is now out of date. **"Level 4"** gave the most functions including the ability for a user to be alerted by telephone. **"Level 3"** users had "all of the functionality of the BTRS product except for the ability to receive alerts via telephone," and **"Level 2"** users could be alerted by e-mail and text pager "but [did] not have access to the [Web] portal." (rev.2/26)

The subsequent levels of "Full," "Limited," and "Basic" (instituted in March 2003) are also out of date. **"Full"** cost about $21 per month per user and was similar to "Level 4." It gave Web portal[†] access, allowed users to change their contact information, and allowed users to be alerted. **"Limited"** cost about $10 per month per user. This had only secure static Web page (not Web portal) access, but did allow users to change their information and to be alerted. **"Basic"** cost about $2 per month per user. Basic users had secure static Web page access. These users could not change their information themselves (this had to be done by a local CAHAN administrator) but could have been alerted by e-mail and alpha pager. (rev.7/2)

On July 1, 2003, Virtual Alert announced a new BTRS licensing model which provides more robust functionality. The new classifications are "Administrator License," "Collaboration License," and "Alert License." (7/2)

The **"Administrator License"** allows management of users, roles, folders, and other aspects of CAHAN. Administrators will be able to post information to the CAHAN Information Site via the forthcoming Content Management Solution. (7/2)

The "Limited" and "Full" licenses were combined into the **"Collaboration License."** This allows access to document management and discussion tools on the secure Web portal. These documentation management tools give

users the ability to improve documents. Such users can send alerts per the permissions granted by Administrators. (7/2)

Unlike the old Basic licenses, the new **"Alert License"** allows users to self-manage their own Profiles. In addition, it allows access to the Public Health Directory and to read-only documents (including the CAHAN Information Site). (7/2)

Details of three current levels of licensing available in the document "CAHAN's New Licensing Model (July 2)" posted to the "CAHAN Administrator Resources" folder of the CAHAN COM Portal (https://cahan.ca.gov/com). (7/2)

104. If I am a CAHAN (BTRS) user, and I go on vacation, is there a way for me to specify who will receive alerts (like the "Out of Office" function in Microsoft Outlook)?

Yes. In CAHAN, you can go to "My Profile" and type "Alternate Contact" information such as "Alternate Email" and "Alternate Phone." Then, when you are on vacation, you can activate an "Alerting Profile" that includes the "Alternate Email," "Alternate Phone," and any other "Alternate Contact" information. (1/10, rev. 1/24)

[†] "Web portal" and "static Web page" are standard terms used in information technology. For definitions, see http://www.webopedia.com/TERM/W/Web_portal.html and http://www.webopedia.com/TERM/s/static.html, among other Web pages. As applied to CAHAN, the Limited and Basic licenses will NOT offer a "broad array of resources and services" such as the ability to post documents. Instead, Limited and Basic users will be able only to READ documents on the secure static web page.

105. Can alerts be sent from an LHJ to CDHS or other LHJs via CAHAN (BTRS)?

The Focus Area E Workgroup discussed at its April 24 and June 2 meetings the questions of who in LHDs should be able to alert the State, and who at the State should be alertable by LHDs. Based on the Workgroup's recommendations, EPO staff have allowed Health Officers, Communicable Disease Controllers, BT Coordinators, Environmental Health Directors, PH Nursing Directors, and HAN Coordinators to alert certain EPO staff and DHS Duty Officers. (rev.7/2)

At its June 27 meeting, the Focus Area E Workgroup asked for guidance regarding alerting among LHJs. Focus Area A staff will be invited to the next Focus Area E Workgroup meeting to discuss this matter, which cannot be decided by Focus Area E alone. (7/2)

106. Can I use CAHAN with an Apple Macintosh computer?

We have tested CAHAN with Internet Explorer (IE) 5.2 and Netscape Navigator 7.0 under Mac OS X 10.1.5. If you use a Mac, you can perform basic functions such as reading alerts and downloading documents. However, you may be unable to perform some CAHAN functions (e.g., changing your profile, sending alerts). These functions require technologies such as Microsoft Digital Dashboard (described in articles such as http://www.opendoor.ca/ODTArticleDashboard.htm) which are unavailable to Macs. Furthermore, the windows may not maintain their sizes in IE. (rev.2/17)
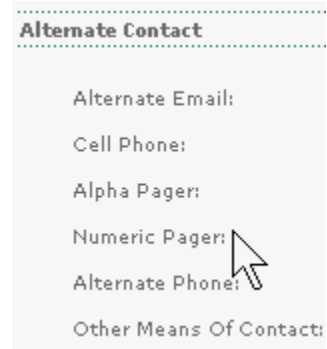
107. Since I cannot indicate a numeric pager as a Location in my Alerting Profile, why does the system ask for numeric pager?

The allowable "Locations" for alerting are Work Phone, Work Email, Home Phone, Cell Phone, Alt. Phone, Alt. Email, and Alpha Pager. The reason that CAHAN has a Numeric Pager field is that someone may wish to reach a CAHAN user urgently. Perhaps that user is unreachable through all CAHAN "Locations," but it's known that the CAHAN user carries a numeric pager. In that case, a CAHAN administrator or other user with proper rights can find not only the numeric pager of the CAHAN user but perhaps even some "Other Means Of Contact" to locate that person. (2/5)

At the February 25 Focus Area E Workgroup teleconference, Virtual Alert said that it would look into the possibility of CAHAN being able to transmit a toll-free "800" number and alert-specific or user-specific PIN to numeric pagers. At the toll-free number, after a user entered the PIN, he/she would hear the same alert being broadcast by the CAHAN's phone alerting process. Alert-specific "generic" PINs would be easier and less expensive to implement than user-specific PINs. (2/26)

108. Is CAHAN protected against computer worms, viruses, etc. that circulate around the Internet?

See the August 12 document "CAHAN W32.Blaster.Worm Update" in the

CAHAN Instructions folder. As stated there, "CAHAN... has a robust infrastructure and systems architecture that provides excellent resilience. Additionally, the CAHAN team monitors numerous resources... in order to provide the best possible protection."

201-299: RELATIONSHIP OF CAHAN (BTRS) TO OTHER COMPUTER SYSTEMS AND STANDARDS[‡]

201. Will the CDHS interim Rapid Alert System, Secure Web Site, and BT Leads Registration page be discontinued when CAHAN (BTRS) is operational?

Not immediately. It is CDHS's intent that the Rapid Alert System (RAS) and Secure Web Site be available as backup systems for approximately one year in case there is a failure of BTRS. Updated CAHAN (BTRS) contact information will be downloaded to RAS for the purposes of backup, but any changes made by users to their contact information within the RAS will not be uploaded to CAHAN (BTRS). (1/7, rev.1/27)

The BT Leads Registration page http://www.dhs.ca.gov/epo/EPOBTRegistration.html will continue indefinitely so that people who are not yet on CAHAN (BTRS) can register with EPO. (1/17)

202. Will implementation of CAHAN (BTRS) be consistent with the Health Insurance Portability and Accountability Act of 1996 (HIPAA)? That is, will privacy, security, and transactions-related concerns be addressed?

EPO will work with Virtual Alert, with CDHS's Privacy Officer, and with other parties to assure HIPAA compliance. (1/7)

Concerning security, on 2003 April 10 CAHAN was upgraded to use a Secure Sockets Layer (SSL) connection. The new URL for CAHAN begins with "https://" instead of "http://". Users who type "http://" will be redirected to the more secure "https://" page; however, if the user is using an older browser, he/she will now receive an error when trying to access CAHAN. (4/11)

CAHAN's role-based application security system will prohibit users from viewing or accessing information that they are not authorized to see based on organizational unit. For example, someone from one LHJ will not be able to access another LHJ's folders or data without explicit permission from the administrator from the other LHJ. Further decisions on security (such as two-factor authentication, see 2003 May 22 entry above) are pending. (rev.7/2)

203. Will CDHS work with Virtual Alert to enhance CAHAN (BTRS) to address critical capacity D ("ensure secure electronic exchange of clinical, laboratory, environmental, and other public health information in standard formats") of Focus Area E?

Yes. The BTRS system currently has the capability to work with the Public Health Information Network (PHIN)[§], but further expansion of data exchange is needed. To accomplish this, EPO staff will work with California Public Health Information Network (CalPHIN) staff; Virtual Alert;

[‡] Such as CDC's Public Health Information Technology Functions and Specifications (for Emergency Preparedness and Bioterrorism), the 2003 version of which is at http://www.bt.cdc.gov/planning/continuationguidance/pdf/appendix-4.pdf.

[§] formerly known as the National Electronic Disease Surveillance System or NEDSS, see http://www.cdc.gov/nedss.

experts in CELDAR[**] and MDL[††] with the CDHS Division of Communicable Disease Control; people who have worked with the Health Alert Network systems in Washington State, Massachusetts, and Arizona; and others. (1/7, rev.7/2)

204. How will CAHAN (BTRS) interface with CELDAR? Will the above "data exchange" enhancement to CAHAN (BTRS) replace the CELDAR project?

Discussions are underway. Currently we envision a portal approach that would provide a single point of entry for local jurisdictions for both CAHAN (BTRS) and CELDAR. Currently there is no discussion of replacing CELDAR with a "data exchange enhancement." (1/7)

205. Are there any future plans to integrate BTRS with other systems such as Vital Records (AVSS), Immunization Registries (CAIR), or other surveillance systems?

The overall CalPHIN plan is being developed by CDHS and its partners and involves the establishment of an integrated data repository. Vital records, immunizations, HEDIS, TB and others could benefit from a common portal interface, data exchange and security infrastructure. (rev.7/2)

206. Does CAHAN meet all Focus Area E requirements?

No. For the full text of CDC's 2002 guidance, see

http://www.bt.cdc.gov/planning/CoopAgreementAward/CDC6BTATTACHMENT-E-MASTER-2-14-2002-639pm.asp. For the full text of CDC's 2003 guidance, see http://www.bt.cdc.gov/planning/continuationguidance/pdf/healthalertnetwork_attache.pdf. For the CDHS Plan and Budget Guidance for Focus Area E, see pages 19-20 of http://www.dhs.ca.gov/epo/PDF/LHDBTGuidanceAugust2002.pdf. CAHAN seats and technology as provided by CDHS to LHJs cannot by themselves address parts of Critical Capacity A and all of Critical Capacities B-D in the 2002 guidance. The 2003 guidance for LHDs is pending. (rev.7/2)

A more detailed discussion of this issue can be found in the document "What CAHAN Covers" in the "CAHAN Instructions" folder on CAHAN itself (https://cahan.ca.gov/cahan/Documents/CAHAN%20Instructions). (rev.7/2)

207. Why on March 26 did the Focus Area E Workgroup and on April 11 did all Focus Area E leads statewide receive presentations on the Community Health Alert Information Network (CHAIN) being deployed by the California Medical Association (CMA) and Invizeon? What are the plans for CHAIN versus CAHAN?

In March 2002, a meeting was held between CDHS leadership and CMA at the CMA offices. There was a promise made that CDHS and CMA would keep each other informed on Focus Area E issues. CMA and Invizeon were about to deploy the CHAIN system (e.g., see http://www.healthdirectory.com/webpages/press-release-7-17-02.asp). (4/18)

[**] CELDAR is the California Electronic Laboratory Disease and Alert Reporting System, which allows "communicable disease reporting from a number of laboratories… to a centralized system" (see http://www.bsa.ca.gov/lhcdir/pubhealth/BurtonOct02.pdf).
[††] MDL is an "Internet-based extension" of the laboratory information system of the CDHS Microbial Diseases Laboratory "providing access to its customers" (see http://www.bsa.ca.gov/lhcdir/pubhealth/BurtonOct02.pdf).

Due to changes in the placement of Focus Area E within CDHS (see http://www.dhs.ca.gov/epo/PDF/CCLHO Presentation 2002-10 Updated.pdf) and in CDHS leadership, no Focus Area E - related communications occurred between CMA and CDHS between March 2002 and March 2003. The two presentations were intended to help fulfill the promise made in March 2002. Because CAHAN cannot meet all Focus Area E requirements (see FAQ #206 above), jurisdictions may want to explore the possibility of using CHAIN to fulfill the requirements (e.g., to reach health care providers in their jurisdictions). (4/18)

There is no technological or conceptual connection between CHAIN and CAHAN at present. EPO staff received demo licenses for CHAIN on May 22 and evaluated CHAIN. They e-mailed their findings to the Focus Area E Workgroup as well as all Focus Area E leads. The evaluation has been posted to the CAHAN ORG portal https://cahan.ca.gov/org. (rev.7/2)